## UNITED STATES DISTRICT COURT

for the

Northern District of California

Northern District of California				
Frescia GARRO PINCHI  Plaintiff(s)  v.  Polly KAISER, Acting Field Office Director, S.F. ICE; Todd LYONS, Acting Director, U.S. ICE; Kristi NOEM, Secretary of U.S. DHS; Pamela BONDI, Attorney General of U.S., in official capacities  Defendant(s)  SUMMONS IN	) ) ) ) ) ) ) Civil Action No. 25-CV-05632 ) ) ) ) ) NA CIVIL ACTION			
To: (Defendant's name and address)				
See attachment to summons				
A lawsuit has been filed against you.  Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:  Abby Sullivan Engen  Centro Legal de la Raza  3400 E. 12th Street  Oakland, CA 94601				
If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.				
	CLERK OF COURT			
Date:				
	Signature of Clerk or Deputy Clerk			

Civil Action No.

25-CV-05632

## PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

	This summons for (no	ame of individual and title, if any)			
was rec	ceived by me on (date)				
	☐ I personally served the summons on the individual at (place)				
			on (date)	; or	
	I left the summons at the individual's residence or usual place of abode with (name)				
	, a person of suitable age and discretion who resides there,				
	on (date), and mailed a copy to the individual's last known address; or				
	I served the summons on (name of individual) , who is designated by law to accept service of process on behalf of (name of organization)				
			on (date)	; or	
	☐ I returned the sur	mmons unexecuted because		; or	
	Other (specify):				
	My fees are \$	for travel and \$	for services, for a total of \$		
	I declare under penalty of perjury that this information is true.				
D .					
Date:	Server's signature  Printed name and title				
			Server's address		

Additional information regarding attempted service, etc:

## ATTACHMENT TO SUMMONS

Case No. 25-CV-05632

Polly Kaiser, Acting Field Office Director San Francisco Immigration and Customs Enforcement Office 630 Sansome Street Room 590 San Francisco, CA 94111

Todd Lyons, Acting Director
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Kristi Noem, Secretary
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